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FAX TRANSMISSION**DATE:** January 8, 2008**PTO IDENTIFIER:** Application Number 10/627,544-Conf. #3558
Patent Number**Inventor:** Peter J. Jones et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** EDWARDS ANGELL PALMER & DODGE LLP

Lisa Swiszc Hazzard

PHONE: (617) 517-5512**Attorney Dkt. #:** 58096(71106)**PAGES (Including Cover Sheet):** 14**CONTENTS:** Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Amendment After Final Action Under 37 C.F.R. 1.116 (9 pages)
Amendment Transmittal (1 page)
Transmittal (1 page)
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PTO/SB/21 (10-07)

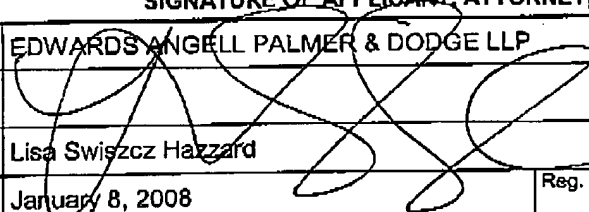
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/627,544-Conf. #3558
	Filing Date	July 25, 2003
	First Named Inventor	Peter J. Jones
	Art Unit	2624
	Examiner Name	John B. Strega
Total Number of Pages in This Submission	Attorney Docket Number 58096(71106)	

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<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; padding: 5px; width: 150px; float: left; margin-bottom: 5px;">Remarks</div>		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	EDWARDS ANGELL PALMER & DODGE LLP	
Signature		
Printed name	Lisa Swiszczy Hazzard	
Date	January 8, 2008	Reg. No. 44,368

BOS2 651540.1

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AMENDMENT TRANSMITTAL LETTER			Docket No. 58096(71106)	
Application No. 10/627,544-Conf. #3558	Filing Date July 25, 2003	Examiner John B. Strege	Art Unit 2624	
Applicant(s): Peter J. Jones et al.				
Invention: METHODS FOR VISUALLY SEPARATING AN OBJECT FROM ITS BACKGROUND, METHODS FOR DETECTING A CAMOUFLAGED OBJECT AGAINST ITS BACKGROUND AND DETECTION APPARATUS EMBODYING SUCH METHODS				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims		- 20 =		x
Independent Claims		- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): Extension for response within second month				230.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				230.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity				
<input type="checkbox"/> No additional fee is required for this amendment.				
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>04-1105</u> in the amount of \$ <u>230.00</u> . A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
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<input checked="" type="checkbox"/> Credit any overpayment <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
Lisa Swiszc Hazzard Attorney/Agent Reg. No.: 44,368 EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (617) 517-5512				Dated: <u>January 8, 2008</u>

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Application No. (if known): 10/627,544

Attorney Docket No.: 58096(71106)

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